

# ATTACHMENT

## HCPCS codes for disposable medical supplies

Effective for dates of service on and after January 1, 2004

Place of service codes			
11	Office	32	Nursing Facility
12	Home	99	Other
31	Skilled Nursing Facility		

Modifiers	
22	Unusual Procedural Service
59	Distinct Procedural Service

Status	Procedure code	Allowable modifier	Replaces or is replaced by code(s)	Description	Place of service	Max fee	Copay	Maximum quantity allowed per month	In NH rate	In HC rate
Added	<b>A4216</b>			Sterile water/saline, 10 ml	11, 12, 31, 32, 99	\$0.12	\$0.50	100 per month	Yes	No
Added	<b>A4217</b>			Sterile water/saline, 500 ml	11, 12, 31, 32, 99	\$1.84	\$0.50	35 per month	Yes	No
Enddated	<b>A4319</b>		A7018 modifier 22							
Enddated	<b>A4323</b>		A7018 modifier 59							
Changed	<b>A4326</b>			Male external catheter specialty type with integral collection chamber, each						No
Added	<b>A4366</b>			Ostomy vent, any type, each	11, 12, 31, 32, 99	\$0.91	\$0.50	20 per month	No	No
Added	<b>A4416</b>			Ostomy pouch, closed, with barrier attached, with filter (one piece), each	11, 12, 31, 32, 99	\$1.94	\$0.50	35 per month	No	No
Added	<b>A4417</b>			Ostomy pouch, closed, with barrier attached, with built-in convexity, with filter (one piece), each	11, 12, 31, 32, 99	\$3.96	\$0.50	35 per month	No	No
Added	<b>A4418</b>			Ostomy pouch, closed; without barrier attached, with filter (one piece), each	11, 12, 31, 32, 99	\$1.44	\$0.50	35 per month	No	No
Added	<b>A4419</b>			Ostomy pouch, closed; for use on barrier with non-locking flange, with filter (two piece), each	11, 12, 31, 32, 99	\$1.62	\$0.50	35 per month	No	No
Added	<b>A4420</b>			Ostomy pouch, closed; for use on barrier with locking flange (two piece), each	11, 12, 31, 32, 99	\$1.68	\$0.50	35 per month	No	No
Added	<b>A4423</b>			Ostomy pouch, closed; for use on barrier with locking flange, with filter (two piece), each	11, 12, 31, 32, 99	\$1.65	\$0.50	35 per month	No	No
Added	<b>A4424</b>			Ostomy pouch, drainable, with barrier attached, with filter (one piece), each	11, 12, 31, 32, 99	\$2.80	\$0.50	20 per month	No	No
Added	<b>A4425</b>			Ostomy pouch, drainable; for use on barrier with non-locking flange, with filter (two piece system), each	11, 12, 31, 32, 99	\$2.26	\$0.50	20 per month	No	No
Added	<b>A4426</b>			Ostomy pouch, drainable; for use on barrier with locking flange (two piece system), each	11, 12, 31, 32, 99	\$2.32	\$0.50	20 per month	No	No

Status	Procedure code	Allowable modifier	Replaces or is replaced by code(s)	Description	Place of service	Max fee	Copay	Maximum quantity allowed per month	In NH rate	In HC rate
Added	<b>A4427</b>			Ostomy pouch, drainable; for use on barrier with locking flange, with filter (two piece system), each	11, 12, 31, 32, 99	\$2.35	\$0.50	20 per month	No	No
Added	<b>A4428</b>			Ostomy pouch, urinary, with extended wear barrier attached, with faucet-type tap with valve (one piece), each	11, 12, 31, 32, 99	\$6.51	\$0.50	6 per month	No	No
Added	<b>A4429</b>			Ostomy pouch, urinary, with barrier attached, with built-in convexity, with faucet-type tap with valve (one piece), each	11, 12, 31, 32, 99	\$6.73	\$0.50	6 per month	No	No
Added	<b>A4430</b>			Ostomy pouch, urinary, with extended wear barrier attached, with built-in convexity, with faucet-type tap with valve (one piece), each	11, 12, 31, 32, 99	\$7.07	\$0.50	6 per month	No	No
Added	<b>A4431</b>			Ostomy pouch, urinary; with barrier attached, with faucet-type tap with valve (one piece), each	11, 12, 31, 32, 99	\$6.22	\$0.50	6 per month	No	No
Added	<b>A4432</b>			Ostomy pouch, urinary; for use on barrier with non-locking flange, with faucet-type tap with valve (two piece), each	11, 12, 31, 32, 99	\$3.59	\$0.50	6 per month	No	No
Added	<b>A4433</b>			Ostomy pouch, urinary; for use on barrier with locking flange (two piece), each	11, 12, 31, 32, 99	\$3.59	\$0.50	6 per month	No	No
Added	<b>A4434</b>			Ostomy pouch, urinary; for use on barrier with locking flange, with faucet-type tap with valve (two piece), each	11, 12, 31, 32, 99	\$3.76	\$0.50	6 per month	No	No
Enddated	<b>A4621</b>		A7525							
Enddated	<b>A4621</b>	59	A7524							
Enddated	<b>A4622</b>		A7521							
Changed	<b>A4623</b>			Tracheostomy, inner cannula						No
Added	<b>A6407</b>			Packing strips, non-impregnated, up to two inches in width, per linear yard	11, 12, 31, 32, 99	\$1.32	\$0.50	35 per month	Yes	No
Added	<b>A6456</b>			Zinc paste impregnated bandage, non-elastic, knitted/woven, width greater than or equal to three inches and less than five inches, per yard	11, 12, 31, 32, 99	\$1.27	\$0.50	35 per month	Yes	No
Added	<b>A7004</b>	22	A7019	Saline solution, for use with inhalation drugs, per 10 ml, metered dose dispenser	11, 12, 31, 32, 99	\$0.36	\$0.50	200 per month	No	No
Changed	<b>A7007</b>			Large volume nebulizer, disposable, unfilled, used with aerosol compressor		\$3.36				
Added	<b>A7007</b>	22	A7020	Sterile water or sterile saline, 1000 ml used with large volume nebulizer	11, 12, 31, 32, 99	\$3.49	\$0.50	35 per month	Yes	No
Added	<b>A7008</b>	22	A7020 modifier 22	Sterile water, heated humidifier use 1650 cc-2000 cc	11, 12, 31, 32, 99	\$6.85	\$0.50	35 per month	Yes	No
Added	<b>A7008</b>	59	A7020 modifier 59	Sterile water/autofeed/heated humidifier use 1650 cc-2000 cc	11, 12, 31, 32, 99	\$10.48	\$1.00	10 per month	Yes	No
Added	<b>A7018</b>	22	A4319	Sterile water irrigation solution, 1000 ml	11, 12, 31, 32, 99	\$3.49	\$0.50	35 per month	Yes	No
Added	<b>A7018</b>	59	A4323	Sterile saline irrigation solution, 1000 ml	11, 12, 31, 32, 99	\$4.50	\$0.50	35 per month	Yes	No

Status	Procedure code	Allowable modifier	Replaces or is replaced by code(s)	Description	Place of service	Max fee	Copay	Maximum quantity allowed per month	In NH rate	In HC rate
Enddated	<b>A7019</b>		A7004 modifier 22							
Enddated	<b>A7020</b>		A7007 modifier 22							
Enddated	<b>A7020</b>	22	A7008 modifier 22							
Enddated	<b>A7020</b>	59	A7008 modifier 59							
Added	<b>A7046</b>			Water chamber for humidifier, used with positive airway pressure device, replacement, each	11, 12, 31, 32, 99	\$11.25	\$1.00	4 per month	Yes	No
Added	<b>A7520</b>			Tracheostomy/laryngectomy tube, non-cuffed, polyvinylchloride (PVC), silicone or equal, each	11, 12, 31, 32, 99	\$60.16	\$3.00	1 per month in combination with A7521	Yes	No
Added	<b>A7521</b>		A4622	Tracheostomy/laryngectomy tube, cuffed, polyvinylchloride (PVC), silicone or equal, each	11, 12, 31, 32, 99	\$60.16	\$3.00	1 per month in combination with A7520	Yes	No
Added	<b>A7522</b>			Tracheostomy/laryngectomy tube, stainless steel or equal (sterilizable and reusable), each	11, 12, 31, 32, 99	\$85.00	\$3.00	1 per 3 months	Yes	No
Added	<b>A7523</b>			Tracheostomy shower protector, each	11, 12, 31, 32, 99	\$5.81	\$0.50	1 per month	Yes	No
Added	<b>A7524</b>		A4621 modifier 59	Tracheostoma stent/stud/button, each	11, 12, 31, 32, 99	\$6.23	\$0.50	4 per month	Yes	No
Added	<b>A7525</b>		A4621	Tracheostomy mask, each	11, 12, 31, 32, 99	\$1.40	\$0.50	20 per month	Yes	No
Added	<b>A7526</b>		S8181	Tracheostomy tube collar/holder, each	11, 12, 31, 32, 99	\$3.06	\$0.50	35 per month	Yes	No
Enddated	<b>S8181</b>		A7526							